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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/622,769
Filing Date	July 21, 2003
First Named Inventor	Emir
Art Unit	1623
Examiner Name	Olson
Attorney Docket Number	223332

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

26694

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

26694

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Edward D. Grieff				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

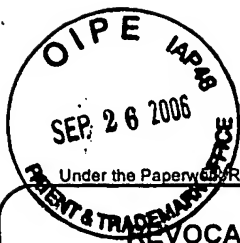
Signature			
Name	Birol Emir		
Date	July 31, 2006	Telephone	917-538-4106

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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PTO/SB/82 (01-06)

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SIGNATURE of Applicant or Assignee of Record

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Name	Ponni Subbiah		
Date	7/31/06	Telephone	212-573-1578

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